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|--|-------------------------|---|
| UTILITY PATENT APPLICATION TRANSMITTAL | Attorney Docket No.: | 50P4530.01 |
| | First Inventor: | Thomas Patrick Dawson |
| | Title: | MEMORY SYSTEM, COMPUTER SYSTEM, PROCESSING UNIT AND METHOD |
| | Express Mail Label No.: | ER 19563968 US |

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| | |
|---|--|
| APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents) | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231 |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate (Submit an original and a duplicate for fee processing) 2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27 3. <input checked="" type="checkbox"/> Specification Total Pages <input type="text" value="18"/> (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to sequence listing, a table, -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets <input type="text" value="5"/> 5. Oath or Declaration a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/ divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies); ii. <input type="checkbox"/> or paper c. <input type="checkbox"/> Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) <input checked="" type="checkbox"/> Power of Attorney Statement (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> IDS <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) 15. <input type="checkbox"/> Certified Copy of Priority Document 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SH/35 or its equivalent. 17. <input type="checkbox"/> Other: |

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

| | | | | |
|--|-------------------------------------|---|-----------------|---|
| <input checked="" type="checkbox"/> Continuation | <input type="checkbox"/> Divisional | <input type="checkbox"/> Continuation-in-Part (CIP) | Prior Appl. No. | <input type="text" value="09/797,458"/> |
| Prior Appl. information: | Examiner: | <input type="text" value="Nassar G. Moazzami"/> | Group/Art Unit: | <input type="text" value="2187"/> |

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

| | | | |
|---|--|------------------|---|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label | <input type="text" value="27774"/> | or | <input type="checkbox"/> Correspondence address below |
| Name | Karin L. Williams | | |
| Address | Mayer Fortkort & Williams, PC | | |
| | 251 North Avenue West, 2 nd Floor | | |
| City | Westfield | State | NJ |
| Country | U.S.A. | Telephone | 908-518-7700 |
| | | Fax | 908-518-7795 |
| Name | Karin L. Williams | Registration No. | 36,721 |

SIGNATURE Karin L. Williams Date

22002 U.S. PTO

10/619045



07/14/03

31656 U.S. PTO

FEE TRANSMITTAL

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT

(\$ 906

Application Number

Unassigned

Filing Date

Filed Herewith

First Named Inventor

Thomas Patrick Dawson

Examiner Name

Unassigned

Group Art Unit

2187

Attorney Docket No.

50P4530.01

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to.

Deposit Account Number

50-1047

Deposit Account Name

Mayer Fortkort & Williams

☒ Charge Any Additional Fee required under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed

☐ Check ☐ Credit Card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Fee Code | Small Fee Code | Small Fee Code | Small Fee Code | Fee Paid |
|----------------------|----------------------|----------------------|----------------------|------------------------|
| 101 | 750 | 201 | 375 | Utility filing fee |
| 106 | 330 | 206 | 165 | Design filing fee |
| 107 | 510 | 207 | 255 | Plant filing fee |
| 108 | 740 | 208 | 370 | Reissue filing fee |
| 114 | 160 | 214 | 80 | Provisional filing fee |

SUBTOTAL (1) (\$ 750

2. EXTRA CLAIM FEES

| Total Claims | Previously Paid* | Extra Claims | Fee from below | Fee Paid |
|--------------------|------------------|--------------|----------------|----------|
| 24 | 20 | 4 | 18 | 72 |
| Independent Claims | 4 | 3 | 1 | 84 |

Multiple Dependent

280 =

| Large Fee Code | Small Fee Code | Small Fee Code | Small Fee Code | Fee Description |
|----------------------|----------------------|----------------------|----------------------|---|
| 103 | 18 | 203 | 9 | Claims in excess of 20 |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 |
| 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid |
| 109 | 84 | 209 | 42 | * Reissue independent claims over original patent |
| 110 | 18 | 210 | 9 | * Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$ 156

*OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE

*For Reissues, see above

SUBMITTED BY

Name (Print/Type)

Karin L. Williams

Signature

Karin L. Williams

Registration No.

36,721

Telephone

908 518-7700

Date

7/14/03

Complete if Known

3. ADDITIONAL FEES

| Large Entity Fee Code | Small Entity Fee Code | Large Entity Fee Code | Small Entity Fee Code | Fee Description |
|--------------------------------|--------------------------------|--------------------------------|--------------------------------|---|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath |
| 127 | 50 | 227 | 25 | Surcharge - late Provisional filing |
| 139 | 130 | 139 | 130 | Non-English specification |
| 147 | 2520 | 147 | 2520 | For filing a request for ex parte Reexamination |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action |
| 113 | 1840* | 113 | 1840* | Requesting publication of SIR after Examiner action |
| 115 | 110 | 215 | 55 | Extension for reply within first month |
| 116 | 400 | 216 | 200 | Extension for reply within second month |
| 117 | 920 | 217 | 460 | Extension for reply within third month |
| 118 | 1440 | 218 | 720 | Extension for reply within fourth month |
| 126 | 1960 | 226 | 980 | Extension for reply within fifth month |
| 119 | 320 | 219 | 160 | Notice of Appeal |
| 120 | 320 | 220 | 160 | Filing a brief in support of an appeal |
| 121 | 280 | 221 | 140 | Request for oral hearing |
| 138 | 1510 | 138 | 1510 | Petition to institute a public use proceeding |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable |
| 141 | 1280 | 241 | 640 | Petition to revive - unintentional |
| 142 | 1280 | 242 | 640 | Utility issue fee (or reissue) |
| 143 | 460 | 243 | 230 | Design issue fee |
| 144 | 620 | 244 | 310 | Plant issue fee |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner |
| 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(g) |
| 126 | 180 | 126 | 180 | Submission of IDS |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of parties) |
| 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) |
| 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) |
| 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application |


Other fee (specify)

* Reduced by Basic Filing Fee paid

SUBTOTAL (3)

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Complete (if applicable)

| | | | |
|---|-------------------------------|------------------------|--------------------------|
| CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10) Applicant(s): Thomas Patrick Dawson | | | Docket No. 50P4530.01 |
| Serial No. Unassigned | Filing Date Filed Herewith | Examiner Unassigned | Group Art Unit 2187 |
| Invention: MEMORY SYSTEM, COMPUTER SYSTEM, PROCESSING UNIT AND METHOD | | | |
| <p>I hereby certify that the following correspondence:</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"><p>New U.S. Continuation Patent Application</p></div> <p style="text-align: center;"><i>(Identify type of correspondence)</i></p> <p>is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on</p> <p style="text-align: center;"><u>7/14/03</u> <i>(Date)</i></p> <p style="text-align: center;"><u>Marjorie Scariati</u> <i>(Typed or Printed Name of Person Mailing Correspondence)</i></p> <p style="text-align: center;"><u></u> <i>(Signature of Person Mailing Correspondence)</i></p> <p style="text-align: center;"><u>ER 195963968 US</u> <i>("Express Mail" Mailing Label Number)</i></p> | | | |
| <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p> | | | |